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CENTRAL FAX CENTER****JAN 25 2007****FAX TRANSMISSION****DATE:** January 25, 2007**PTO IDENTIFIER:** Application Number 10/519,364-Conf. #3037
Patent Number**Inventor:** Ingela PETERSSON et al.**MESSAGE TO:** US Patent and Trademark Office**FAX NUMBER:** (571) 273-8300**FROM:** BIRCH, STEWART, KOLASCH & BIRCH, LLP
Eugene T. Perez**PHONE:** (703) 205-8000**Attorney Dkt. #:** 0104-0496PUS1**PAGES (Including Cover Sheet):** 67**CONTENTS:**
Fax Cover Sheet (1 page)
Certificate of Transmission (1 page)
Amendment Transmittal (1 page)
Second Preliminary Amendment (4 pages)
Substitute Specification (30 pages)
Marked-Up Substitute Specification (30 pages)

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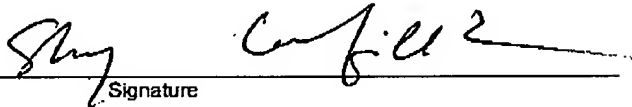
Application No. (if known): 10/519,384

Attorney Docket No.: 0104-0496PUS1

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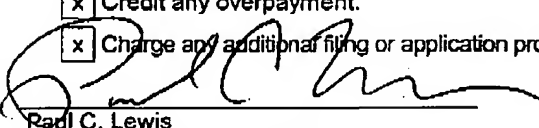
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AMENDMENT TRANSMITTAL LETTER				Docket No. 0104-0496PUS1	
Application No. 10/519,364-Conf. #3037		Filing Date January 18, 2006		Examiner Not Yet Assigned	
				Art Unit 3762	
Applicant(s): Ingela PETERSSON et al.					
Invention: AN IMPLANT AND A METHOD FOR TREATING AN IMPLANT SURFACE					
<p>MS Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450</p> <p>Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below.</p>					
CLAIMS AS AMENDED					
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate	
Total Claims	27	- 27 =	0	x 50.00	0.00
Independent Claims	4	- 4 =	0	x 200.00	0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					
Other fee (please specify):					
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:					0.00
<input checked="" type="checkbox"/> Large Entity <input type="checkbox"/> Small Entity <input checked="" type="checkbox"/> No additional fee is required for this amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of \$ _____. A duplicate copy of this sheet is enclosed. <input type="checkbox"/> A check in the amount of \$ _____ is enclosed. <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. <input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. <u>02-2448</u> as described below. A duplicate copy of this sheet is enclosed. <input checked="" type="checkbox"/> Credit any overpayment. <input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.					
 Radl C. Lewis Attorney Reg. No.: 43,368				Dated: <u>January 25, 2007</u>	
BIRCH, STEWART, KOLASCH & BIRCH, LLP 8110 Gatehouse Road Suite 100 East P.O. Box 747 Falls Church, Virginia 22040-0747 (703) 205-8000					

Birch, Stewart, Kolasch & Birch, LLP

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JAN 25 2007

Docket No.: 0104-0496PUS1
(PATENT)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of:
Ingela PETERSSON et al.

Application No.: 10/519,364

Art Unit: 3762

Filed: January 18, 2006

Examiner: Not Yet Assigned

For: AN IMPLANT AND A METHOD FOR
TREATING AN IMPLANT SURFACE

PRELIMINARY AMENDMENT

MS Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

INTRODUCTORY COMMENTS

The following preliminary amendments and remarks are respectfully submitted in connection with the above-identified application.

This amendment includes:

Amendments to the Specification; and

Remarks.